City of Taylorsville

Community Development Department 2600 West Taylorsville Boulevard Taylorsville, Utah 84118 Phone: (801) 963-5400 Fax: (801) 963-7891



BOARD OF ADJUSTMENT APPLICATION

PLEASE COMPLETE BOTH SIDES OF APPLICATION

Type of Application: ☐ Variance ☐ Special Exception ☐ Appeal	Office Use Only
□ Other:	FILING NUMBER:
Subject Property Address:	FILING FEE:
Applicant Name:	
Mailing Address:	DATE ACCEPTED:
City, State, Zip:	ACCEPTED BY:
Daytime Phone #: Fax #:	RECEIPT NUMBER:
Business Name (if applicable):	ZONING CLASSIFICATION:
Property Owners Name (if different):	
Mailing Address:	MEETING DATE(S):
City, State, Zip:	Application Approved: ☐ yes ☐ no Conditions: ☐ yes ☐ no
Daytime Phone #: Fax #:	
List all applicable ordinances:	Chair, Board of Adjustment
Describe your request/hardship in detail (use additional paper if necessary)	:
Authorized Signature: Date: _	

Note: Obtaining a variance from the Board of Adjustment does not eliminate the necessity of obtaining site plan approval or a building permit (if applicable). Please contact the appropriate Taylorsville City department regarding all new construction projects.

FOR YOUR INFORMATION...

For more information regarding zoning variances and the variance process, please refer to Taylorsville City information form **P-7 Applying for a Zoning Variance** available from the City of Taylorsville Planning and Zoning Division or the Community Development Department counter at Taylorsville City Hall.

Property	Owner's Affidavit
I (we)	, being first duly sworn, depose and say that I (we) am
	in this application: that I (we) have read the application and
	ar with its contents; and that said contents are in all respects
true and correct based upon my personal knowle	
, ,,	
Owner's Signature	Owner's Signature
Subscribed and sworn to before me this	, day of
	Notary Public
	Residing in
	My commission expires:
Agen	t Authorization
I (we)	, the owner(s) of the real property at
	,Taylorsville, Utah, do hereby appoint
	as my (our) agent to represent me (us) with regard to
this application affecting the above described rea	l property, and authorize
to appear on my (our) behalf before any City Boa	rd or Commission considering this application.
Owner's Signature	Owner's Signature
On the day of	, 20, personally appeared before me
the signer(s) of th	e above Agent Authorization who duly acknowledged to me
that they executed the same.	
	Notary Public
	Residing in
	My commission expires: